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Forty-Fourth Annual Report

ON THE STATE OF

THE ASYLUM,

FOR

THE RELIEF OF PERSONS

DEPRIVED OF THE

USE OF THEIR REASON.

PUBLISHED BY DIRECTION OF THE CONTRIBUTORS, THIRD MONTH, 1861.

PHILADELPHIA:

PRINTED BY WILLIAM K. BELLOWES,

Successor to Joseph Rakestraw.

1861.

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Report

FRIENDS ASYLUM FOR THE INSANE,
FREETOWN, MASS.

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SUPERINTENDENT'S REPORT.

THE time has again arrived when it becomes the duty of the Superintendent, under the rules, to present to the Managers his Annual Report of the condition and operations of the Asylum during the past year. In presenting the forty-fourth Annual Report it is gratifying to be able to say, that as far as the objects of the Institution are concerned, the year just concluded has been a successful one. The first Institution, in point of time, opened in this country for the treatment of Insanity on the improved system which had then but recently been established in England by the successful example of the York Retreat, its friends have cause to be gratified that so large an amount of good has been accomplished by it during each year of its existence, in restoring to the use of reason so many unhappy sufferers, and in furnishing an Asylum to many others whose disease unfitted them for intercourse with society, and whose infirmities disqualified them for taking proper care of themselves. It is also a subject for congratulation that, in consequence of the numerous improvements which have been made during the past few years, at no previous time has it been so well provided with every essential requisite for carrying out a thorough system of Hospital treatment, and with every comfort and convenience necessary to the welfare and happiness of its inmates. We

are sensible that we have abundant cause for thankfulness to the Almighty for the blessing which has thus far attended the Institution, and which has, during the past year, protected us from casualties, and from unusual sickness, and rendered availing our efforts for the improvement and recovery of those committed to our care.

At the time of the last Annual Report there were fifty-eight patients remaining in the Institution, and eighteen, viz., seven men and eleven women have been received since, making a total of seventy-six, who have received the benefits of the Institution during the year. The greatest number at any time was sixty-four; the smallest fifty-eight; and the average number for the twelve months was sixty and four-twelfths.

Of the seventy-six patients who have been residents of the Asylum during the year, two have died, and thirteen have been discharged, leaving sixty-one, of whom twenty-nine are men, and thirty-two are women, under care at the present time.

Of the thirteen patients discharged, eight, of whom four were of each sex, were restored; two, one of each sex were improved; and three, one man and two women were stationary. Of those who were discharged restored, two were in the Institution less than three months; three for more than three and less than six months; two for more than six and less than twelve months, and one for more than twelve months; and the average duration of treatment of those who were restored, was one hundred and eighty-four days.

Twenty-two patients have been under special curative treatment during the year, of whom fifteen were cases of recent, and seven of chronic insanity, with the following results. Of the recent cases, eight have been discharged, of whom seven were restored, and one was improved and seven remain; three of whom are restored, three are improved, and one is stationary. Of the seven chronic cases, one was discharged restored, and two stationary, and four remain, of whom two are much improved, and two are improved. There have been two deaths of patients during the year; one a male, the other a female, aged respectively, thirty and sixty-nine years, both of whom had been several years in the Institution. The one died of Epilepsy; the other of Cancer of the Breast.

Statistics.—The following tables, giving the statistics as far as they have been preserved in the records of the Asylum, have been carefully prepared.

TABLE I.—Showing the number of patients of each sex discharged, their condition at the time of discharge; the number at present in the House, and the whole number admitted since the opening of the Institution.

	<i>Men.</i>	<i>Women.</i>	<i>TOTAL.</i>
Discharged—Restored, - -	340	307	647
“ Much improved, - -	56	59	115
“ Improved, - -	87	88	175
“ Stationary, - -	118	117	235
“ Died, - - -	103	94	197
Remaining, - - -	29	32	61
Total, - - -	733	697	1,430

TABLE II.—Showing the sex and civil state of 1,430 patients as far as recorded.

	<i>Men.</i>	<i>Women.</i>	<i>TOTAL.</i>
Single, - - - -	369	306	675
Married, - - - -	245	258	503
Widowers and Widows, - - -	34	67	101
Unknown, - - - -	85	66	151
Total, - - - -	733	697	1,430

TABLE III.—Showing the duration of Insanity in 1,430 cases as far as recorded.

	<i>Men.</i>	<i>Women.</i>	<i>TOTAL.</i>
Less than one year, - - -	420	388	808
From 1 to 5 years, - - -	188	190	378
" 5 " 10 " - - -	44	41	85
" 10 " 20 " - - -	29	26	55
" 20 " 30 " - - -	18	17	35
" 30 " 40 " - - -	0	8	8
" 40 " 50 " - - -	8	9	17
Unknown, - - - -	26	18	44
Total, - - - -	733	697	1,430

TABLE IV.—Showing the age of 1,430 patients at the time of their admission.

	<i>Men.</i>	<i>Women.</i>	<i>TOTAL.</i>
Under 20 years, - - - -	45	54	99
From 20 to 30, - - - -	226	196	422
" 30 " 40, - - - -	173	150	323
" 40 " 50, - - - -	113	139	252
" 50 " 60, - - - -	99	91	190
" 60 " 70, - - - -	54	42	96
" 70 " 80, - - - -	20	16	36
" 80 " 90, - - - -	3	8	11
" 90 " 100, - - - -	0	1	1
Total, - - - -	733	697	1,430

TABLE V.—Showing the residence of 1,430 patients.

Pennsylvania, - - -	1,007	<i>Brought forward,</i> - - -	1,404
New Jersey, - - -	205	Indiana, - - -	5
Maryland, - - -	58	Canada, - - -	5
Delaware, - - -	39	Alabama, - - -	3
New-York, - - -	28	Louisiana, - - -	3
North Carolina, - - -	20	District of Columbia, - - -	2
Virginia, - - -	18	West Indies, - - -	2
Massachusetts, - - -	12	Georgia, - - -	2
Ohio, - - -	9	South Carolina, - - -	2
Missouri, - - -	4	Florida, - - -	1
Rhode Island, - - -	4	Michigan, - - -	1
<i>Carried forward,</i> - - -	1,404	<i>Total,</i> - - -	1,430

TABLE VI.—Showing the occupation of 733 male patients as far as recorded.

Farmers, 182	<i>Brought forward,</i> 401	<i>Brought forward,</i> 441
Merchants, 38	Tailors, 3	Dyer, 1
Clerks, 37	Cabinet-makers, 3	Carman, 1
Tanners & Curriers, 21	Shoemakers, 3	Brewer, 1
Physicians, 14	Brokers, 3	Overseer, 1
Teachers, 12	Laborers, 3	Plasterer, 1
Carpenters, 11	Publishers, 2	Tinman, 1
Lawyers, 9	Machinists, 2	Gardener, 1
Students, 9	Dentists, 2	Confectioner, 1
Manufacturers, 8	Navy Officers, 2	Segar-maker, 1
Druggists, 7	Silversmiths, 2	Gold-beater, 1
Inn-keepers, 6	Millers, 2	Hatter, 1
Blacksmiths, 5	Bricklayers, 2	Whip-maker, 1
Masons, 7	Coopers, 2	Livery-stablekeeper, 1
Operatives, 6	Engineer, 1	Wheelwright, 1
Artists, 4	Watch-maker, 1	Contractor, 1
Painters, 4	Potter, 1	Sexton, 1
Printers, 4	Shop-keeper, 1	Bookbinder, 1
Sailors, 4	Coach-trimmer, 1	Watchcase-maker, 1
Butchers, 4	Cashier of Bank, 1	None, 17
Clergymen, 3	Saddler, 1	Unrecorded, 257
Planters, 3	Engraver, 1	
Jewellers, 3	Brush-maker, 1	<i>Total,</i> 733
<i>Carried forward,</i> 401	<i>Carried forward,</i> 441	

TABLE VII.—Showing the numbers and per centage of recent and chronic cases restored.

	Less than 12 months duration.	More than 12 months duration.	TOTAL.
Number Admitted, - - -	808	622	1,430
“ Restored, - - -	548	99	647
Per centage Restored, - - -	67.82	15.92	45.24

TABLE VIII.—Showing the cause of Insanity in 549 cases.

	<i>Men.</i>	<i>Women.</i>	TOTAL.
Ill-health, - - -	42	82	124
Intemperance, - - -	76	1	77
Domestic trouble, - - -	16	62	78
Puerperal, - - -	0	33	33
Loss of property, - - -	25	3	28
Excitement about religion, - - -	6	18	24
Organic disease of the brain, - - -	18	5	23
Anxiety, - - -	10	10	20
Disappointment, - - -	5	16	21
Masturbation, - - -	17	2	19
Epilepsy, - - -	13	6	19
Grief, - - -	3	13	16
Over-exertion, - - -	7	7	14
Abuse of opium, - - -	2	7	9
Blow on the head, - - -	6	0	6
Fear, - - -	3	3	6
Old age, - - -	3	3	6
Jealousy, - - -	2	3	5
Excessive study, - - -	2	1	3
Sudden wealth, - - -	1	2	3
Insolation, - - -	2	1	3
Syphilis, - - -	2	1	3
Hardship and exposure, - - -	2	0	2
Nostalgia, - - -	0	2	2
Excessive use of tobacco, - - -	0	1	1
Healing of ulcer, - - -	1	0	1
Poison of lead, - - -	1	0	1
Paronychia, - - -	0	1	1
Spiritualism, - - -	1	0	1
Total, - - -	266	283	549

TABLE IX.—Showing the age at the time of the first attack in 645 cases admitted since 1842.

	<i>Men.</i>	<i>Women.</i>	TOTAL.
Under 20 years, - - -	66	55	121
From 20 to 30, - - -	115	102	217
“ 30 “ 40, - - -	60	61	121
“ 40 “ 50, - - -	36	56	92
“ 50 “ 60, - - -	25	26	51
“ 60 “ 70, - - -	11	13	24
“ 70 “ 80, - - -	7	9	16
“ 80 “ 90, - - -	0	3	3
Total, - - -	320	325	645

The above tables represent the statistical facts afforded by the aggregate number of patients who have been received into the Asylum since its opening. As these facts may, however, be misinterpreted, it may not be out of place to add here a few words of explanation, in order to prevent conclusions being drawn from them which they really do not warrant. For example, when it is well known that the number of single persons in the community is much smaller than that of married, and it is seen in the second table that the number of such persons admitted as patients into the Asylum, largely exceeds that of the married, it would appear reasonable to conclude that a single life was unfavorable to the maintenance of sound mental health. The facts, however, do not necessarily lead to such an inference, but may be explained otherwise by reflecting that a large proportion of attacks of insanity occur previous to the period of life when the marriage connection is generally formed, and that persons predisposed to insanity frequently

manifest in early life peculiarities of disposition and temperament which are obstacles to the formation of such connections. In addition to this, many persons, aware of the existence of an hereditary predisposition to insanity in their families, voluntarily refrain from entering into the marriage relation. If these different classes are taken into consideration, they will be found sufficient to account for the preponderance of cases of the unmarried insane without the necessity of supposing that their disease is, in any way, caused by the fact of their being single; and it will appear more reasonable to conclude that they are unmarried because they were insane, or likely to become so, than to suppose that they are insane because they were unmarried.

The sixth table, showing the influence of occupation, must be considered with reference to the comparative numbers engaged in the various occupations, or it may also lead to erroneous conclusions. Without this precaution the table would appear to show, that Farmers were much more liable to insanity than those who pursue other vocations; but when it is remembered that the farmers compose only a little more than one-fourth of the cases included in the table, and that they constitute, relatively, a much larger proportion than this of the population of the country, the advantage, as regards exemption from the disease, will be found to be entirely on their side.

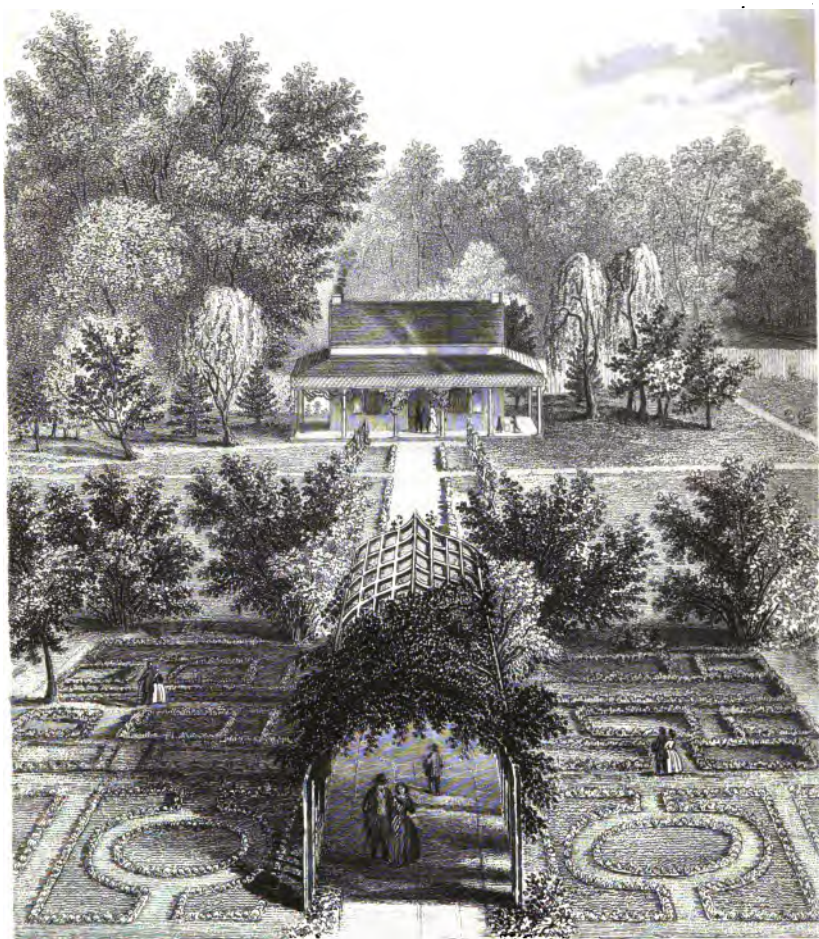
In the table of causes, the circumstances are alone considered, which were supposed to be influential in exciting the disease. The predisposing causes are,

however, of equal or greater importance, since without the predisposition, which is produced by their action, the exciting causes would, in a great majority of cases, be insufficient to give rise to the disease. Probably, the most frequent and active of these is the predisposition inherited from an insane ancestry, and consisting of a peculiar constitutional bias or tendency, which is capable of being handed down to posterity in the same way as an other physical peculiarity. In many cases the tendency is inherited without the disease being actually developed, and may then be transmitted by parents who have themselves never shown any symptoms of the disease. In other cases the predisposition, instead of being inherited, may be acquired, and in these cases may also be transmitted to the offspring without ever being developed into an attack of insanity in the individual with whom it originated. The experience of the Asylum furnishes some remarkable instances of this kind. Three brothers of one family, have been, at different times, and three sisters of another, are at present patients in the Asylum, and in neither family had insanity been known to exist previously.

The table shows that if intemperance and depraved habits give rise to a large amount of insanity, a certain proportion of cases have their origin in anxiety, disappointment, and excitement in relation to objects in themselves harmless or even praiseworthy. Intense application of the mind, over-exertion, and fatigue are also frequent exciting causes of the disease. It has been, perhaps, too commonly supposed that

insanity is the effect of some fault or vice of the person affected, and this is, doubtless, one reason why the disease has been so generally regarded as a stigma or reproach; but if this belief is true, in regard to a certain proportion of cases, it is equally true that a sense of duty, and the responsibilities resting upon them, have, in numerous instances, urged individuals beyond their strength, and have impelled them to exertions to which their energies were entirely inadequate, until their health and strength have suddenly given way, and a condition of serious mental and physical prostration has ensued, sometimes ending in hopeless insanity. There are, probably, but few individuals employed in occupations which require prolonged intellectual exertion, under a constant pressure of care and anxiety, who have not, at some period of their lives felt the warning which has compelled them to desist from over-work, or who have not seen some of their friends and acquaintances, similarly engaged, break down under the strain upon their energies, and sink into a state of physical and mental imbecility from which they never recovered.

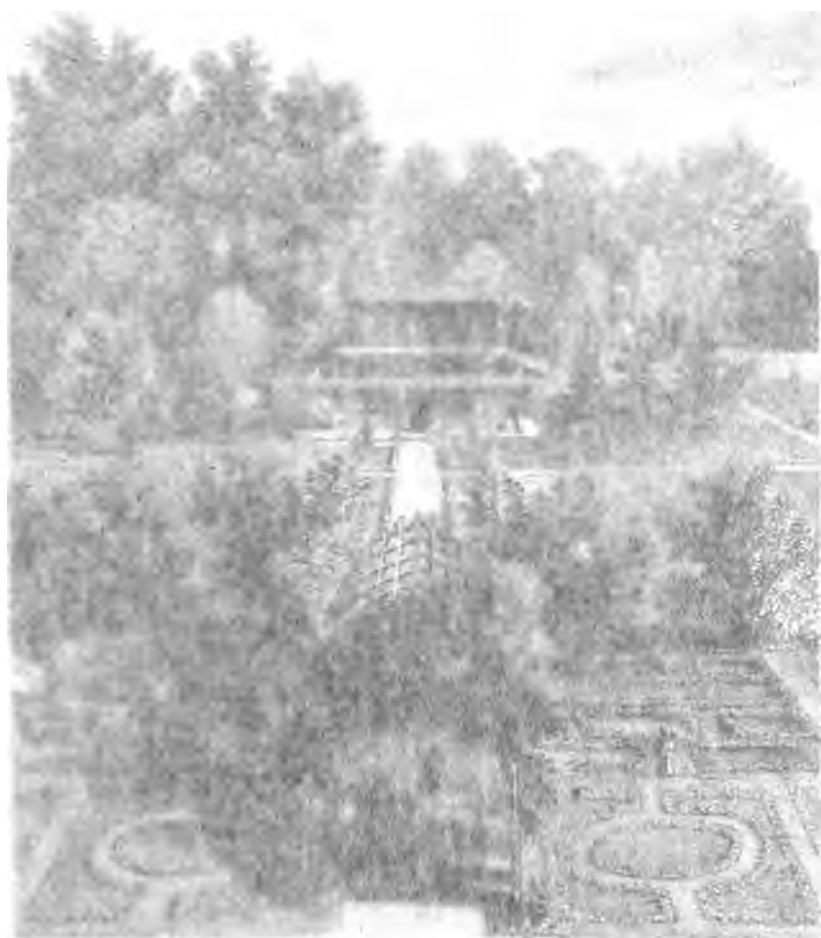
Occupation and Moral treatment.—Exercise for the muscular system and for the mental faculties of the insane is so important a part of the management necessary for their welfare and recovery, that to neglect it, would be to give up all hopes of improving their condition. The means which we have continued to make use of for furnishing employment to our patients, have been so fully and frequently described in previous reports, that it will now be only necessary



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PHILADELPHIA.





briefly to recapitulate them. Daily walks into the surrounding country; employment in some of the lighter labors of the farm and garden, and in taking care of the grounds, and in the carpenter and workshop, and exercise on the circular railroad are among the principal means which have been successfully resorted to during the past year, as heretofore, for furnishing bodily exercise to our male patients. Within doors the same variety of means for affording entertainment and pleasant occupation, which have been previously described, have continued to be employed; consisting of a well-stocked Library; a great variety of daily and weekly newspapers; materials for drawing and painting; games, puzzles, &c. The women are employed in sewing, knitting, quilting, and embroidering, and take daily walks on the grounds in pleasant weather. The carriage is driven out several times a week, affording frequent opportunities for riding to those who wish it, or are likely to be benefitted by it. In order to extend the facilities for this kind of exercise, a donkey and cart were purchased early in the year, and a new two-horse carriage, capable of carrying six persons, was procured. These have been in frequent use since, and the donkey—a very gentle and docile animal—being always at hand, and being driven by the female patients themselves, or their attendants, is in almost constant use in pleasant weather, and has proved an important addition to our means of affording exercise to the patients.

The Lectures and Exhibitions, with the Magic Lantern, have been continued during the winter. The

achromatic lenses for the lantern, which were procured a year ago, have proved a valuable acquisition, and the instrument has been still further improved by an arrangement for using oxygen, which will have the effect of producing a much stronger light than that furnished by the usual method.

Pictures and engravings, in neat frames, hanging on the walls of the parlors and corridors, afford objects of interest, which contribute to the entertainment of the patients, and among no class have such objects appeared to be better appreciated, or to be attended with more satisfactory results, than among the most excited patients of both sexes. During the past summer a large circular mound of earth was made in the yard, connected with the Lodge for excited male patients, and planted with flowers. This yard was occupied daily, in pleasant weather, by this class of patients, who, strange as it may appear, offered the plants no injury, and seemed gratified with having them near. Among the same class of female patients, plants, in pots, occupying the windows during the winter, and pictures on the walls, have contributed greatly to their gratification, and in no instance have they been injured by them.

One of the halls, occupied by a quiet class of male patients, has been enlivened by several large greenhouse plants, in pots, which were placed opposite to the windows, and have remained during the winter undisturbed by the patients. All of the parlors and day-rooms, occupied by female patients, have also

been rendered more cheerful by plants in the windows, which by their luxuriant growth, and the gratification and pleasure they have afforded the patients, have fully repaid the care and attention bestowed on them.

Among the means introduced during the past year, may be mentioned an aquarium, placed in the Library and stocked with a collection of fresh water fishes and aquatic plants. It affords an opportunity of observing the habits of these interesting little animals, which is frequently enjoyed by the patients. The games of cricket and foot-ball have also been used, for the first time, by our inmates, and have been participated in with much spirit by a considerable number of the men. During the fine afternoons of autumn, and even occasionally on fine days through the winter, the lawn, in front of the Asylum buildings, has presented an animated spectacle of between twenty and thirty patients and attendants engaged, either as spectators or performers, in one of these exhilarating pastimes.

In conducting the moral treatment of the insane, it is necessary to present to them motives for action, which shall be sufficient to induce them to make an effort to employ their remaining faculties in the most rational manner they are capable of. Whilst they are thus engaged in healthful and innocent employments and recreations calculated to promote their own, and each other's physical and mental well-being, they are sensible of a feeling of comfort and satisfaction, arising from the consciousness that they have been usefully employed, and that their existence is not en-

tirely without an object and aim. It is essential that a spirit of active kindness, and a sincere desire to avoid everything calculated to wound their sensitive feelings, should be the governing principles of all who are concerned in their management; and it is equally essential that the desire to aid them shall be mingled with a proper share of that indescribable faculty called tact, which enables its possessor to measure, as with the sensitiveness of a thermometer, every varying phase and shade of feeling of the patient. Without this faculty the best intentions, and the strongest wishes to relieve, to comfort, or to benefit, may only be productive of suffering or annoyance.

But when the various means prescribed in the moral treatment of the insane, are carried out in the spirit of kindness, and with due regard to the particular requirements of each case, they feel at once conscious of the adaptation to their condition of the influences by which they are surrounded, they are sensible that their disease is understood, and that the proper remedies are being applied; and the result is a feeling of confidence and security, which affords the best opportunity for the recovery of the mental and physical energies. Patients who are thus situated will generally be found to be contented with their lot, and under suitable medical treatment, unless the disease has been allowed to become chronic, can scarcely fail to be restored to the full exercise of their healthy mental energies. The general spirit of contentment and satisfaction pervading the family, which has frequently been observed by visitors, the unfrequency

of attempts to escape, and the interest in their former associates, and the prosperity of the institution, manifested by patients after their recovery and discharge, may be regarded as so many evidences that the influences to which they were subjected during their residence here, were such at least, as were satisfactory to themselves.

Improvements and repairs.—The improvements of the past few years have been designed, not only to increase the facilities for classification and efficient supervision, and moral management of the patients, but also to impart an air of comfort, and even of a degree of elegance to the interior arrangements, in order that the residents of the Asylum shall feel, as little as possible, the deprivation of the comforts of their own homes, and in order also, that nothing may be presented to their view which shall suggest the idea of confinement, or even of a Hospital for the care of the sick. With this view most of the rooms, except those occupied by excited patients, are neatly carpeted, and provided with furniture such as would be suitable for private houses of the best class. The parlors and sitting-rooms are also furnished in the same manner, and in the halls and day-rooms, occupied by even the most excited patients, no article of furniture, or contrivance of any kind, is ever seen which can suggest the idea of restraint or confinement. The accommodations which have been provided in the centre building for patients whose means are sufficient to justify the additional expense, are well adapted to a small class in whom the insanity is of a very mild form,

and to whom intercourse with the insane generally, might be very unpleasant. This class of patients can here enjoy many of the benefits of Hospital treatment without being subject to all the rules of the establishment. In company with their attendants, they have free access to all parts of the grounds, and can receive their friends, who come to visit them, in their own rooms.

During the year we have had a full opportunity for testing the advantages which have resulted from the introduction of gas for lighting the building. Though the cost, including interest on the expenditure for laying the pipe and putting up the fixtures, is somewhat greater than that of lighting by oil, the greatly increased illuminating power, far more than counter-balances the additional cost of the gas. The increased cheerfulness imparted to the rooms and halls, and the facilities which it has extended to the patients for occupation and amusement during the long winter evenings, would of themselves amply repay the difference of cost, while the cleanliness of the house, and the time and labor formerly expended, but which is now saved, in filling and cleaning lamps, and removing oil spilt upon the floors and carpets, may be considered a clear gain.

A number of improvements have been made during the past year. The walls of the corridors of the second story of the east and west wings, have been covered with paper to imitate stone or marble, and varnished. The floors having been painted and newly

carpeted, and many of the sleeping apartments having been re-furnished with new carpets, the general aspect of this portion of the building has been rendered more attractive, and an increased air of comfort has been given to the interior. The second story hall, of the centre building, and one of the day-rooms, have been papered, and the walls of another day-room have been painted a light stone color. Another large room in the centre building has been appropriated to the use of a patient, and handsomely furnished. One of these rooms has been divided by a partition so as to make a comfortable sized room, 13×22 feet, for a patient, and a smaller one for an attendant. The whole of the wood work of the building, inside and out, that of the Library and wash-house, the coping to the yard walls, and a portion of the fencing about the house have been painted with two coats of the best lead and zinc paints. A new grape-vine arbor, ninety feet in length, covering a portion of the walk to the Library, has been constructed in place of an old one which required renewing.

It may not be improper to add, for general information, that the Asylum was built and furnished by the original contributors, at their own individual expense, for the exclusive benefit of their own religious society, but for many years past it has been freely opened to all other classes and denominations, who now constitute a very large majority of the recipients of its benefits. The successors to the founders of the institution, continue to contribute to its funds, as has been frequently necessary for carrying on needful

improvements. The managers give their time freely, and no one connected with it, either as manager or contributor, can receive, for the performance of his duties as such, or for money contributed, the smallest pecuniary reward or benefit. Its funds can be used for no other purpose than for the benefit of its inmates and the reduction of the charge for board of patients in limited circumstances, without regard to sect. A considerable number have been relieved during the past, as in previous years, but we have been compelled to refuse relief in other pressing cases for want of sufficient means. There is no class in the community on whom insanity falls with heavier weight, than on the industrious and deserving poor, who are able to pay a moderate rate of board, but whose self-respect revolts at the idea of sending their friends to the Institution entirely on charity. From much and long-continued observation of the wants of the insane, I am convinced that there is no class in this community so much in need of sympathy and relief as this, and in no way could money be appropriated for the benefit of the insane, so advantageously as for their relief. Persons about making their wills, and others who, during their lives, are desirous of contributing to the necessities of this deserving class, cannot do so more effectually than by bequests and donations to the "Contributors to the Asylum for the relief of persons deprived of the use of their reason."

Conclusion.—The attendants have generally performed their duties with fidelity, and with due regard to the weighty responsibilities of their several posi-

tions. A number of them have satisfactorily filled their stations for several years, and others, after a shorter term of service, have left to assume positions of greater usefulness elsewhere. The utmost care is taken in selecting persons of correct principles, habits and deportment, who shall be fitted by uprightness of character, and integrity of life and conversation, to be the associates, as well as in many respects, the guides and counsellors of the patients. No one is retained in these situations who does not give promise, on reasonable trial, of fulfilling the above requirements.

It gives me pleasure to add my testimony to the fidelity and efficiency with which the matron has performed the highly important duties of her station. My thanks are due to Dr. Ephraim Hopkins, the Assistant Physician, for the interest manifested by him in the welfare and improvement of the patients, and for the cheerful and efficient performance of the duties assigned him; and to James Jackson, clerk, for the activity and energy displayed by him in attention to the duties of his department.

I close with earnest wishes for the continued success and prosperity of the Institution, and that the blessing of Providence may be extended towards it.

J. H. WORTHINGTON.

Philadelphia, Third month 1st, 1861.

Forty-Fourth Annual Report

OF THE

MANAGERS OF THE ASYLUM,

TO THE CONTRIBUTORS.

At the time of the last Annual Report, there were fifty-eight patients under care, and eighteen have been received since; making seventy-six who have been in the Asylum during the year. Of this number 13 have been discharged and two have died. Of those discharged, eight were restored, two were improved, and three were stationary. There were sixty-one in the house on the 1st inst., of whom three were restored, one was much improved, fourteen were improved, and forty-three were stationary.

The Treasurer's Report exhibits a balance in his hands, on the 1st instant, of \$185 74, on the general account. On account of the Trust Legacies, the income of which is applicable to the relief of certain classes of patients in restricted circumstances, there was an aggregate balance of \$322 51.

The expenditures of the year have been as follows :

Farm and Family Account, including

repairs, renewal of furniture, &c.,	\$11,765 63
Salaries and wages, - - -	5,425 67
Medical Department, - - -	141 00
Incidentals, - - - - -	250 33
Annuities, - - - - -	300 00

\$17,882 63

The charges for board of patients have

amounted to - - - - \$17,578 55

And the receipts from Interest and

Ground Rents, - - - - 881 35

\$18,659 90

The products of the Farm have been, principally, 92 bushels of wheat, 28 do. rye, 146 do. potatoes, 110 do. turnips, 44 do. oats, 16 do. buckwheat, 716 pounds of veal, 1467 do. pork, 39 wagon-loads of hay, an ample supply of vegetables for the use of the family, and the usual amount of poultry, milk, butter, &c.

Although efforts, guided by enlightened benevolence, have been directed for a number of years past to the improvement of Asylums for the Insane, the work is still progressive, and we can scarcely anticipate a period when it shall entirely cease to be so. The Managers have therefore been solicitous that the

Institution under their charge should maintain its standing, as an efficient agency for the treatment and cure of insanity, and thus fully accomplish the objects of its establishment. With this view, they have within the past few years, adopted and carried out a variety of improvements on the premises—chiefly such as were proposed by our judicious Superintendent. The cost of these has, in the aggregate, been very considerable; but the gratifying result has been increased neatness and attractiveness in the entire aspect of the buildings and grounds, as well as important additions to the comforts and convenience of the patients and family. The halls, larger apartments and, indeed, the whole interior of the main building devoted to the patients, is now thoroughly neat and well furnished, presenting an air of homelike cheerfulness, well calculated to have a beneficial influence upon them.

Experience has demonstrated that the best treatment of the insane is that which is characterized by the most kindness, gentleness and sympathy. This is the system of management at the Asylum, coercion and restraint being very rarely resorted to, and the patients being allowed as much liberty as is compatible with their security and welfare.

Our Asylum certainly possesses an important advantage, which may, with propriety, be adverted to, without any disparagement of the many larger and noble institutions, which Christian philanthropy has, of late years, provided for the reception of the

insane. This is found in its moderate size and the limited number of its patients, who, in consequence, are much more easily and frequently brought under the immediate notice and care of its medical head. A regular and constant supervision is also exercised by the managers, who visit weekly, in rotation ; beside which the Superintendent has the counsel and assistance of a standing committee of their number, who are frequently at the Asylum for that purpose.

The report of the Superintendent, which is herewith submitted will give the contributors fuller information respecting the operations of the past year, and the present condition of the Asylum, which may, we think, be justly considered satisfactory. At no former period, probably, has it been so well provided, in all respects, with the means of promoting the comfort and recovery of the insane; and we hope that it will long continue to afford a peaceful and safe retreat for a portion of this deeply afflicted class of our fellow-creatures; and, with the Divine blessing, be instrumental in restoring many of them to health and usefulness.

Signed by direction and on behalf of the Managers,

CHARLES ELLIS, *Clerk.*

Philadelphia, Third month 11th, 1861.

OFFICERS AND MANAGERS.

CLERK OF THE CONTRIBUTORS,

William Bettle, No. 426 North Sixth Street.

TREASURER,

Horatio C. Wood, No. 612 Race Street.

CLERK OF THE BOARD OF MANAGERS,

Charles Ellis, No. 1724 Chestnut Street.

PHYSICIAN AND SUPERINTENDENT,

Joshua H. Worthington, M. D.

MATRON,—Margaret H. Worthington.

MANAGERS.

George G. Williams,
Samuel Bettle, Jr.
Charles Ellis,
Jeremiah Hacker,
William Bettle,
James Thorp,
Horatio C. Wood,
John C. Allen,
John Carter,
John M. Whitall,

Mark Balderston,
Benjamin J. Crew,
Richard Richardson,
Wistar Morris,
Samuel Morris,
Elihu Roberts,
Elliston P. Morris,
William L. Edwards,
Nathan Hilles,
David Scull.

COMMITTEE ON ADMISSIONS.

Samuel Bettle, Jr., No. 149 North Tenth Street.

Charles Ellis, No. 1724 Chestnut Street, and No. 724 Market Street.

William Bettle, No. 426 North Sixth Street, and No. 26 South Third Street.

John C. Allen, No. 335 South Fifth Street, and No. 321 North Front Street.

Horatio C. Wood, No. 612 Race Street, and No. 117 Chestnut Street.

John M. Whittall, No. 1317 Filbert St., and No. 410 Race Street.

Wistar Morris, No. 209 South Third Street.

William L. Edwards, No. 602 North Twenty-Second Street, and No. 8 North Front Street.

Nathan Hilles, Frankford.

Elliston P. Morris, Germantown, and No. 805 Market Street.

INFORMATION RESPECTING THE ADMISSION OF PATIENTS INTO THE ASYLUM.*

The Institution is open for the reception of all classes of the Insane, without regard to the duration or curability of the disease. It is proper to state, however, that idiots or persons affected with mania-a-potu are not considered suitable subjects for this Asylum.

Previous to a patient being taken to the Institution, it is necessary to arrange the rate of board with the Committee on Admissions, and to furnish them with a Certificate of insanity from some respectable physician, accompanied by a request from a guardian, near relative, or friend, that the individual may be received into the Asylum.

For the payment of board, &c., a Bond must be signed by some responsible persons as sureties, one of whom must reside in or near Philadelphia.

The charge for board includes washing, medicines, medical attendance, &c.

If private attendants are deemed necessary, or desirable, they can at all times be furnished, by a special arrangement with the Superintendent.

The following are the forms for Physician's Certificate, for the Request for Admission, and for the Bond.

* Letters sent by Mail to the Asylum, should be directed "Frankford Post Office," Philadelphia.

PHYSICIAN'S CERTIFICATE.

HAVING on the day of mo. 18 , examined
 of aged years, I hereby certify from
 my own knowledge, that is in a state of insanity, and
 proper to be received into a house provided for the relief of persons of
 that description.

I further certify, that the Answers annexed to the following Questions are correct, as far as I can judge.

18

Physician.

A thorough knowledge of the history of cases of Insanity being important to those concerned in their treatment, the friends of patients applying for admission into the Asylum, are particularly requested, with the aid of the Physician, to furnish full and explicit Answers to the following

QUESTIONS.

1. Is the patient single or married? What has been the patient's occupation?

Answer.

2. What is supposed to be the cause of this attack of insanity?—When and how did it first show itself?

Answer.

3. On what subjects, or in what way is derangement *now* manifested? Have there been any fixed delusions? Is the patient rational at intervals?

Answer.

4. What has been the duration of the present attack? Have there been one or more previous attacks, and if so, of what duration and at what age?

Answer.

5. What relatives of the patient, including grand-parents and their descendants, have been insane?

Answer.

6. Had the patient previously been subject to Epilepsy, diseases of the skin, discharges or sores, or any other bodily disease; or, had he or she received any injury of the head?

Answer.

7. What derangement of the general health has accompanied the mental disorder?

Answer.

8. Was the patient noted for any eccentricity or peculiarity of temper, habits, disposition or pursuits?

Answer.

9. Is the patient noisy or violent, or disposed to injure him or herself or others? If so, in what manner?

Answer.

10. Has the patient ever attempted suicide? If so, in what way? Is there *now* any propensity of the kind?

Answer.

11. Is the patient addicted to any mischievous practices, such as destroying clothing, breaking glass, furniture, &c.? What are the habits as regards eating, sleeping, and cleanliness?

Answer.

12. Has the patient been addicted to the use of ardent spirits, tobacco, opium, or any other stimulants?

Answer.

13. Has restraint or confinement been employed; if so, of what kind and how long continued?

Answer.

14. State the general course of medical and moral treatment which has been pursued, and the effects observed therefrom?

Answer.

Please mention any other circumstances which may serve to throw light on the case.

REQUEST.

Request that _____ who is in a state of insanity, may be admitted as a Patient into the "Asylum for the Relief of Persons deprived of the use of their reason."

BOND.

APPLICATION is hereby made for the admission of _____ as a patient into the Asylum for the relief of persons deprived of the use of their reason; upon whose admission, we severally engage to provide a sufficiency of suitable clothing for _____ use whilst there; to pay to _____ Superintendent of said Institution, or to his

assigns or successor in office, dollars per week, for board; and not less than four weeks' board to be paid under any circumstances; the said charge for board to be continued until shall be regularly discharged; and to make compensation for all damages done by to the glass, bedding, or furniture, and to cause to be removed when discharged;—but if taken away *uncured*, against the advice and consent of the Superintendent before the expiration of three calendar months, to pay board for thirteen weeks.

Witness our hands and seals, this day of A. D. 18

WITNESS.

(L. S.)

(L. S.)

The foregoing preliminaries having been complied with, an order is given by the Committee on Admissions, authorizing the Superintendent of the Asylum to receive the patient.

OF THE VISITORS TO THE ASYLUM.

When near relations or particular friends of patients, desire to be admitted to see their connexions, application must be made to the Superintendent, who may allow such visits, when circumstances will admit.

As the general admission of visitors would be improper and injurious to the patients, no persons, except as above, shall be admitted to the apartments occupied by patients, unless introduced by a Manager; but on application to the Superintendent, they may be shown such parts of the building and appendages as are not so occupied.

In order to preserve quiet on the first-day of the week, visiting on any account on that day, either in the house or on the premises, will not be permitted, unless under very peculiar circumstances.

ANNUITIES.

A mode of obtaining contributions by annuities, not much known amongst us, but familiar to Friends in England, has been agreed on by the Contributors. On paying any sum of money to the Treasurer, for the use of the Institution, interest of six per cent. thereon,

is annually to be paid to the annuitant; at whose decease the interest money ceases, and the principal remains the property of the Asylum. This mode will probably be convenient to many who are desirous of promoting the designs of the Institution, and yet do not prefer making any considerable donation during their lifetime.

FORMS OF LEGACY.

I. FORM OF A BEQUEST OF PERSONAL ESTATE.

"I give and bequeath to A. B. and C. D., and the survivor of them, and the executors and administrators of such survivor, the sum of _____ in trust for the use of an Institution in Philadelphia, known by the name of 'The Contributors to the Asylum for the relief of persons deprived of the use of their reason,' and to be paid by the said Trustees to the Treasurer for the time being of the said Institution."

II. FORM OF A DEVISE OF REAL ESTATE.

"I give and devise to A. B. and C. D., and their heirs, all that (here describe the property) _____ together with the appurtenances, to hold to them, the said A. B. and C. D., and the survivor of them, and the heirs of such survivor forever; in trust nevertheless, for the sole use and benefit of an Institution in Philadelphia, known by the name of 'The Contributors to the Asylum for the relief of persons deprived of the use of their reason,' and upon this further trust, absolutely to dispose of, and convey the same, either in fee, or for such other estate, and in such way and manner, as the Contributors to the said Asylum shall, at any meeting or meetings, order, direct and appoint."

✂ The Annual Meeting of the Contributors to the Asylum for the Relief of Persons deprived of the use of their Reason, will be held on fourth-day, the 19th of the Third month, 1862, at 3 o'clock, P. M., in the Arch street Meeting-house.

MANAGERS OF THE ASYLUM FOR 1861—62.

CLASSED TO VISIT THE ASYLUM WEEKLY ON SEVENTH-DAY.

FROM 3rd mo. 13th to 4th mo. 8th.	{ William L. Edwards, No. 8 N. Front street. George G. Williams, Germantown. Richard Richardson, No. 522 Arch street.
4th mo. 8th to 5th mo. 13th.	{ Richard Richardson. Elihu Roberts, N. E. cor. Race & Jacoby st. Wistar Morris, No. 209 South Third street.
5th mo. 13th to 6th mo. 10th.	{ Elihu Roberts. Wistar Morris. Samuel Bettie, Jr., No. 149 N. Tenth street.
6th mo. 10th to 7th mo. 8th.	{ Samuel Bettie, Jr. Samuel Morris, near Olney. Nathan Hilles, Frankford.
7th mo. 8th to 8th mo. 12th.	{ Samuel Morris. Nathan Hilles. David Scull, No. 815 Arch street.
8th mo. 12th to 9th mo. 9th.	{ David Scull. Jeremiah Hacker, No. 316 S. Fourth street. John Carter, No. 329 S. Twelfth street.
9th mo. 9th to 10th mo. 14th.	{ Jeremiah Hacker. John Carter. John C. Allen, No. 335 South Fifth street.
10th mo. 14th to 11th mo. 11th.	{ John C. Allen. William Bettie, No. 426 N. Sixth street. John M. Whitall, No. 1317 Filbert street.
11th mo. 11th to 12th mo. 9th.	{ William Bettie. John M. Whitall. Mark Balderston, No. 320 N. Sixth street.
12th mo. 9th to 1st mo. 13th. 1862.	{ Mark Balderston. Benj. J. Crew, No. 417 Marshall street. James Thorp, Frankford.
1st mo. 13th to 2nd mo. 10th.	{ Benjamin J. Crew. James Thorp. Elliston P. Morris, Germantown.
2nd mo. 10th to 3rd mo. 10th.	{ Elliston P. Morris. George G. Williams. William L. Edwards.

UNIVERSITY OF MICHIGAN



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